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| ISSUE CLASSIFICATION |

PATENT NUMBER

## U.S. UTILITY Patent Application

O.I.P.E.

PATENT DATE

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|---|-----------------|---------------------|---------------|--------------------------|------------------------|
| APPLICATION NO.<br>09/897593                            | CONT/PRIOR<br>D | CLASS<br>205<br>705 | SUBCLASS<br>8 | ART UNIT<br>2151<br>2161 | EXAMINER<br>Elisca, P. |
| APPLICANT<br>David Ashby<br>had parent                  |                 |                     |               |                          |                        |
| TITLE<br>Project docket management apparatus and method |                 |                     |               |                          |                        |
| PTO-2040<br>12/99                                       |                 |                     |               |                          |                        |

| ISSUING CLASSIFICATION  |        |       |  |  |  |
|---|--------|-------|--|--|--|
| CROSS REFERENCE(S)  |        |       |  |  |  |
| CLASS   | NUMBER | CLASS | CROSS CLASS (NON-EXAMINING ART UNITS IN THIS CASE) |  |  |
| INTERNATIONAL CLASSIFICATION                                      |        |       |  |  |  |
| <input type="checkbox"/> Continued on Issue Slip (check this box) |        |       |  |  |  |

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| <input type="checkbox"/> TERMINAL DISCLAIMER   |  | DRAWINGS                                   |              |            | CLAIMS ALLOWED              |                      |
| <input type="checkbox"/> The term of this patent, subsequent to _____ (date) has been disclaimed.  |  | Sheets Drawg.                              | Figs. Drawg. | Print Fig. | Total Claims                | Print Claim No. C.R. |
| <input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent No. _____.   |  | (Assistant Examiner) _____<br>(Date) _____ |              |            | NOTICE OF ALLOWANCE MADE TO |                      |
| <input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.  |  | (Primary Examiner) _____<br>(Date) _____   |              |            | ISSUE FEE                   |                      |
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